

Fiscal Note 2011 Biennium

| Bill # Primary Sponsor: | HB0578 or: Caferro, Mary | | | Title: Health corps for in-home medical care Status: As Introduced | | |
|-------------------------|---------------------------------------|---------------------|---|---|---|---|
| C | Local Gov Impact the Executive Budget | ✓ | Needs to be included Significant Long-Term | | ☑ | Technical Concerns Dedicated Revenue Form Attached |

FISCAL SUMMARY

| | FY 2010 Difference | FY 2011 Difference | FY 2012 Difference | FY 2013 Difference |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Expenditures: | | | | |
| General Fund | \$16,823 | \$16,931 | \$17,164 | \$17,385 |
| Federal Special Revenue | \$17,041 | \$16,925 | \$16,809 | \$16,705 |
| Revenue: | | | | |
| Federal Special Revenue | \$17,041 | \$16,925 | \$16,809 | \$16,705 |
| Net Impact-General Fund Balance: | (\$16,823) | (\$16,931) | (\$17,164) | (\$17,385) |

Description of fiscal impact:

HB 578 provides for the creation of the Montana Health Corps, a group of retired physicians who would provide home health care to patients eligible for Medicare and Medicaid, and puts limits on the charges they may submit for these visits.

FISCAL ANALYSIS

Assumptions:

- 1. If claims submitted by Health Corps are processed through the state Agency Wide Accounting and Client System (AWACS), these claims could be processed using current HRD staff. The division would need approximately .25 FTE, Administrative Specialist, pay band 5, to develop the program and maintain the database = \$8,614 per year.
- 2. The FTE would be funded using 100% general funds, with a 2.5% inflationary factor in FY 2012 & FY 2013.

- 3. It is assumed that 3% of the state's 84,160 Medicaid enrollees would receive a service from the Health Corps in a state fiscal year (3% x 84,160 = 2,525 recipients). The bill stipulates \$10 per visit, therefore $$10 \times 2,525 = $25,250$ total cost per year.
- 4. The current Federal Medical Assistance Percentage (FMAP) is as follows:

| Fiscal | | State | Federal | Federal | Total |
|---------|---------|---------|---------|----------|----------|
| Year | State % | Share | % | Share | Funds |
| FY 2010 | 32.51% | \$8,209 | 67.49% | \$17,041 | \$25,250 |
| FY 2011 | 32.94% | \$8,317 | 67.06% | \$16,933 | \$25,250 |
| FY 2012 | 33.01% | \$8,335 | 66.99% | \$16,915 | \$25,250 |
| FY 2013 | 33.01% | \$8,335 | 66.99% | \$16,915 | \$25,250 |

| | FY 2010 <u>Difference</u> | FY 2011 <u>Difference</u> | FY 2012 <u>Difference</u> | FY 2013 <u>Difference</u> | | |
|---|------------------------------|------------------------------|------------------------------|------------------------------|--|--|
| Fiscal Impact: | | | | | | |
| FTE | 0.25 | 0.25 | 0.25 | 0.25 | | |
| Expenditures: | | | | | | |
| Personal Services | \$8,614 | \$8,614 | \$8,829 | \$9,050 | | |
| Benefits | \$25,250 | \$25,250 | \$25,250 | \$25,250 | | |
| TOTAL Expenditures | \$33,864 | \$33,864 | \$34,079 | \$34,300 | | |
| Funding of Expenditures: | | | | | | |
| General Fund (01) | \$16,823 | \$16,931 | \$17,164 | \$17,385 | | |
| Federal Special Revenue (03) | \$17,041 | \$16,933 | \$16,915 | \$16,915 | | |
| TOTAL Funding of Exp. | \$33,864 | \$33,864 | \$34,079 | \$34,300 | | |
| Revenues: | | | | | | |
| Federal Special Revenue (03) | \$17,041 | \$16,925 | \$16,809 | \$16,705 | | |
| TOTAL Revenues | \$17,041 | \$16,925 | \$16,809 | \$16,705 | | |
| Net Impact to Fund Balance (Revenue minus Funding of Expenditures): | | | | | | |
| General Fund (01) | (\$16,823) | (\$16,931) | (\$17,164) | (\$17,385) | | |

Technical Notes:

- 1. This bill states that a health corps member may charge \$10 for a patient contact and may submit a charge to Medicare or Medicaid. The state may not legislate Medicare services. Therefore, this fiscal note applies to Medicaid services only.
- 2. This bill states that a purpose of this bill is to provide home health care visits for patients who have trouble traveling. It is unclear 1) the extent to which there may be travel expenses that participating physicians may incur, and 2) who would be responsible for these travel expenses.

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|--------------------|------|----------------------------|------|
| Sponsor's Initials | Date | Budget Director's Initials | Date |